PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number

CLAIMS AS FILED - PART I								SMALL	FNTITY		OTHE	O TLAAL
TOTAL CLAIMS			(Colur	(Column 1)		(Column 2)		TYPE		OF	OTHER THAN SMALL ENTITY	
					30		1	RATE	FEE		RATE	FEE
FOR			NUMBE	NUMBER FILED		NUMBER EXTRA		BASIC FE	E 355.0	O OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS			n	minus 20=		·	1	X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS				minus 3 =		•		X40=		OR	X80=	
М	ULTIPLE DEPE	ENDENT CLAIM I	PRESENT					+135=	 	7	<u> </u>	
•	f the differenc	e in column 1 is	s less than :	zero, enter	"0" in (column 2	•	TOTAL	-	OR	L	
		CLAIMS AS	AMENDE	MENDED - PART II				TOTAL	L	OR	TOTAL	TUAN
_	1	(Column 1)		(Column 2) (Column 3)				SMALL	ENTITY	OR	OTHER SMALL I	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID F	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE	-	RATE	ADDI- TIONAL FEE
	Total	1.50	Minus	1.2	<u>S</u>	=		X\$ 9=		OR	X\$18=	
	Independent FIRST PRESI	ENTATION OF M	Minus ULTIPLE DE	PENDENT	CLAIM	=		X40=		OR	X80=	
	·~· .	•		CHOCK	OLYMIN			+135=		OR	+270=	
•	•						L A	TOTAL DDIT. FEE		OR	TOTAL ADDIT. FEE	
_		(Column 1)	The state of the s	(Colum		(Column 3)			;	-		
MEN		REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIOL PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	٠	Minus	**		=		X\$ 9=	·.	OR	X\$18=	
	Independent	NTATION OF 14	Minus	***		=		X40=		OR	X80=	
	·	NTATION OF MU	DETIPLE DEI	PENDENT	CLAIM			+135=		1	.070	
		,					L	+135= TOTAL		OR	+270=	-
		(Calina d)					AD	DIT. FEE		OR A	DDIT. FEE	
	130 S 100 S	(Column 1) CLAIMS	DOTATION OF THE	' (Columr		(Column 3)	-					
-		REMAINING AFTER AMENDMENT		NUMBE PREVIOU PAID FO	R	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	**		=		X\$ 9=		OR	X\$18=	
: L	ndependent	1	Minus	***	1	=		X40=		OR	X80=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM											
+135= If the entry in column 1 is less than the entry in column 2, write "0" in column 3.								TOTAL		Ľ	+270=	
f	If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number for										TOTAL DIT. FEE	
ın	e Highest Numb	per Previously Paid	For" (Total or	Independent)) is the h	ighest number t	found	in the appr	opriate box	in colun	nn 1.	